Image# 14960460950 PAGE 1 / 13

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Other	Than An	Authorize	d Committ	tee		Office Use Only	
NAME OF COMMITTEE (in full)	TYPE OR	PRINT ▼		ample: If typer the lines.	ing, type	12FE4M5		
TENET HEALTHCAR	E CORP	ORATIO	V POLITIC	CAL ACT	ION COM	MITTEE		
ADDRESS (number and street)	1445 Ro	ss Avenue						
Check if different than previously reported. (ACC)	Suite 140 Dallas	00				TX	75202-2703	-
2. FEC IDENTIFICATION N	UMBER ▼		CITY 🛦		5	STATE 🛦	ZIP CC	DE 🛦
C C00119354			3. IS THIS REPORT		NEW (N) OR	AN (A)	MENDED)	
4. TYPE OF REPORT (Choose One)	(b) Mor Rep Due		Feb 20 (M2)		May 20 (M5) Jun 20 (M6)		20 (M8)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Quarterly Reports:			, ,		, ,		20 (M9) 20 (M10)	(Non-Election Year Only) Jan 31 (YE)
April 15 Quarterly Report (Q1) (c)	10 Davi	Apr 20 (M4)		Jul 20 (M7)			
July 15 Quarterly Report (12-Day PRE-Election Report for t		Primary (12 Convention		General Special (Runoff (12R)
October 15 Quarterly Report (Q3)							
January 31 Year-End Report (YE)	E	Election on	M M /	D D /	Y	in the State of	of
July 31 Mid-Year Report (Non-electi Year Only) (MY)	on (d)	30-Day POST-Elect Report for t		General (30	G)	Runoff (3	30R)	Special (30S)
Termination Repor (TER)	t		Election on	M = M /	D = D /	Y	in the State of	of
5. Covering Period	M / D 01		014	through	01	31	2014	
I certify that I have examined to Type or Print Name of Treasur	•		est of my kno	wledge and	belief it is true	e, correct and	d complete.	
Signature of Treasurer Mr.	Todd Plott			[Electronical	ly Filed] D	ate 02	20	2014
NOTE: Submission of false, erro	neous, or inc	omplete infor	mation may s	ubject the pe	rson signing th	is Report to th	he penalties of 2	U.S.C. §437g.
Office Use Only							FEC FOR Rev. 12/2	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
3.	(a) Cash on Hand January 1, 2014		119469.51
	(b) Cash on Hand at Beginning of Reporting Period	119469.51	
	(c) Total Receipts (from Line 19)	74099.12	74099.12
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	193568.63	193568.63
7.	Total Disbursements (from Line 31)	27039.00	27039.00
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	166529.63	166529.63
).	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. (Contributions (other than loans) From:	Total Tillo I Cilou	Calcillati Teal to Bate
(a) Individuals/Persons Other		
	Than Political Committees		0050.00
	(i) Itemized (use Schedule A)	2050.00	2050.00
	(ii) Unitemized	7382.00	7382.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	9432.00	9432.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry		
	Totals to Line 33, page 5)▶	9432.00	9432.00
2. T	ransfers From Affiliated/Other		
F	Party Committees	64667.12	64667.12
2 v	All Loans Received	0.00	0.00
o. <i>F</i>	LUAIIS NECEIVEU	3.55	0.00
4. L	oan Repayments Received	0.00	0.00
5. C	Offsets To Operating Expenditures		, , , , , , , , , , , , , , , , , , , ,
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. F	Refunds of Contributions Made	, , , , , , , , , , , , , , , , , , , ,	
to	Federal Candidates and Other		
	Political Committees	0.00	0.00
	Other Federal Receipts		
	Dividends, Interest, etc.)	0.00	0.00
-	ransfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
	(from Schedule H3)	0.00	0.00
/	h) Lovin Funds (from Schodulo UE)	0.00	0.00
(b) Levin Funds (from Schedule H5)		0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. T	Total Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))▶	74099.12	74099.1
0. T	otal Federal Receipts		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: — (a) Allocated Federal/Non-Federal		Calolidai Tour-to-Date
Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00
Expenditures	0.00	0.00
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b)) ▶	0.00	0.00
Transfers to Affiliated/Other Party	0.00	0.00
Contributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	16000.00	16000.00
Independent Expenditures	0.00	0.00
(use Schedule E) Coordinated Party Expenditures	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
(use Scriedule F)		0.00
Loan Repayments Made	0.00	0.00
	0.00	0.00
Loans MadeRefunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	39.00	39.00
Thai i dilical dominitoda	55.00	7
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	39.00	39.00
T T		
Other Disbursements	11000.00	11000.00
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely		
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add		
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	27039.00	27039.00
2, 7 = 2, = 2, = 2, = 3, = 3 3 3 3 (3),	2,000.00	21039.00
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	07000 00	07000 00
from Line 31)	27039.00	27039.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	9432.00	9432.00
4. Total Contribution Refunds (from Line 28(d))	39.00	39.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9393.00	9393.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE	NUMBER	: PAG	E 6 OF	13
(check onl	y one)			
X 11a	11b	11c	12	
13	14	15	16	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) TENET HEALTHCARE CORF	PORATION POLITICAL ACTION C	OMMITTEE
Full Name (Last, First, Middle Initial) MARK F CORCORAN Mailing Address 5391 Highland Pine Ln		Date of Receipt
City Mableton FEC ID number of contributing federal political committee. Name of Employer TENET HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code GA 30126-5697 C Occupation VICE PRESIDENT LABOR RELATIONS Aggregate Year-to-Date ▼ 1000.00	O1 06 2014 Transaction ID: A99B8CE50F2DA4A62A10 Amount of Each Receipt this Period 1000.00 Other 2014
Full Name (Last, First, Middle Initial) TREVOR FETTER Mailing Address 3821 Beverly Dr City Dallas FEC ID number of contributing federal political committee. Name of Employer TENET HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) Other (specify)	State Zip Code TX 75205-2807 C Occupation CEO AND PRESIDENT Aggregate Year-to-Date ▼ 666.00	Date of Receipt O1 25 2014 Transaction ID: AD661E42C2887443884D Amount of Each Receipt this Period 666.00 Payroll Deduction: \$333.00/Bi-Weekly
Full Name (Last, First, Middle Initial) AUDREY T ANDREWS Mailing Address 702 Penfolds Ln City Coppell FEC ID number of contributing federal political committee. Name of Employer TENET HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code TX 75019-4544 C Occupation GENERAL COUNSEL Aggregate Year-to-Date ▼ 384.00	Date of Receipt O1 25 2014 Transaction ID : A6171802AF7724DB68C6 Amount of Each Receipt this Period 384.00 Payroll Deduction: \$192.00/Bi-Weekly
SUBTOTAL of Receipts This Page (optional)	<u> </u>	2050.00
TOTAL This Period (last page this line numb	er only)	2050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	F	DR	LINE	NU	MBER	:	PAGE		7	OF	13
Use separate schedule(s)	(с	he	ck only	or	ne)						
for each category of the Detailed Summary Page			11a		11b		11c	X	12		
			13		14		15		16		17

	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) TENET HEALTHCARE CORP	ORATION POLITICAL ACTION C	OMMITTEE
Full Name (Last, First, Middle Initial) Vanguard Health Management Inc. I Mailing Address 20 Burton Hills Boulevard Suite 100 City Nashville FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	PAC State Zip Code TN 37215-6409 C Occupation Aggregate Year-to-Date ▼ 64667.12	Date of Receipt O1 06 2014 Transaction ID : ADAF4D0E9B3C74BECBF Amount of Each Receipt this Period 64667.12 Other 2014
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General	State Zip Code C Occupation Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Amount of Each Receipt this Period
Other (specify) ▼		
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code C Occupation Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	>	64667.12
TOTAL This Period (last page this line number	r only)	64667.12

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 8 OF 13
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b	22 🗙 23 24 25 26
Г		27	28a 28b 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)	and dadress of any point		
TENET HEALTHCARE CORPORA	ATION POLITICAL A	ACTION CO	OMMITTEE
/ TENET HEREITIONINE SORT SIN	THOIT OLITIOAL 7	101101100	
Full Name (Last, First, Middle Initial)			
A. Roskam For Congress Committee			Date of Disbursement
Mailing Address P. O. Box 713			01 27 2014
Mailing Address P. O. Box 713			01 27 2014
City	State Zip Code		
Wheaton	IL 60187-0713		Transaction ID: B5AC0193733D948DBBF5
Purpose of Disbursement			
Primary 2014			Amount of Each Disbursement this Period
Candidate Name		Category/	5000.00
Rep. Peter J. Roskam Office Sought: House Disburse	ment For: 2014	Туре	7
Senate Sought.	Primary General		
President	Other (specify)		
State: IL District: 06	, , , , , , , , , , , , , , , , , , ,		
Full Name (Last, First, Middle Initial)			
B. ALAN LOWENTHAL FOR CONGI	RESS		Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 6380 WILSHIRE BLVD., #1612			01 27 2014
City	State Zip Code		Transaction ID : B2D46E8075DF34C069D2
LOS ANGELES	CA 90048		Transaction in . D2D40E0073D1 34C003D2
Purpose of Disbursement Primary 2014			Amount of Fook Dishurasment this Device
Candidate Name			Amount of Each Disbursement this Period
Alan Lowenthal		Category/ Type	1000.00
	ment For: 2014	Турс	, , , , , , , , , , , , , , , , , , , ,
	Primary General		
President	Other (specify)		
State: CA District: 47			
Full Name (Last, First, Middle Initial)			
C. Alaskans for Begich 2014			Date of Disbursement
M 22 A 11			M M / D D / Y Y Y Y
Mailing Address 1231 W NORTHERN LTS #605			01 29 2014
City	State Zip Code		
Anchorage	AK 99503-2337		Transaction ID: BEC8119A1635A4B10897
Purpose of Disbursement			
Primary 2014			Amount of Each Disbursement this Period
Candidate Name		Category/	5000.00
Sen. Mark Begich Office Sought: House Disburse	ment For: 2014	Туре	7
Senate	Primary General		
President	Other (specify)		
State: AK District:	- · · · (-F)/ •		
SUBTOTAL of Disbursements This Page (optional).			11000.00
j ,			
TOTAL This Period (last page this line number only	r)		

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SCHEDULE B (FEC Form 3X)	Harasana I. I. I. C.	FOR LINE N	NUMBER:	PAGE 9 OF 13
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 28a 28b	24 25 26 28c 29 30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) TENET HEALTHCARE CORPORA	TION POLITICAL A	CTION CC	MMITTEE	
Full Name (Last, First, Middle Initial)			Date of Disburseme	int
A. WALDEN FOR CONGRESS Mailing Address 3009 DETHAM RIDGE			01 27	2014
	7. 0. 1			
City HOOD RIVER	State Zip Code OR 97031		Transaction ID : E	37C7FA987FB984BD18CA
Purpose of Disbursement Primary 2014			Amount of Each Dis	sbursement this Period
Candidate Name Gregory P Walden		Category/ Type		2500.00
Senate President	nent For: 2014 Primary General Other (specify)			
State: OR District: 02 Full Name (Last, First, Middle Initial) B. TENN POLITICAL ACTION COMM Mailing Address 228 S WASHINGTON STREET SU	,	PAC)	Date of Disburseme	ent / Y Y Y Y Y Y 2014
ALEXANDRIA	State Zip Code VA 22314		Transaction ID : E	34492109793774216A4C
Purpose of Disbursement Other 2014			Amount of Each Dis	sbursement this Period
Candidate Name		Category/ Type		2500.00
Senate	nent For: 2014 Primary General Other (specify) Other2014			
Full Name (Last, First, Middle Initial) C.			Date of Disburseme	ent Y Y Y Y
Mailing Address			W - W / D - D	
City	State Zip Code			
Purpose of Disbursement			Amount of Each Dis	sbursement this Period
Candidate Name		Category/ Type		
Office Sought: Senate President State: Disburser	nent For: Primary General Other (specify) ▼		-,	
				5000.00
SUBTOTAL of Disbursements This Page (optional)		<u> </u>		
TOTAL This Period (last page this line number only)				16000.00

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SCHEDULE B	(FEC Form 3X)			FOR	I INE N	NUMBER	· · ·		F	PAGE	10	OF 13
ITEMIZED DISE	`						ly one)					
		Detailed Summary Page			21b	22		23	24		25	26
					27	X 28a		28b	28		29	301
Any information copied or for commercial pure	trom such Reports and poses, other than using th	Statements may not be sold or e name and address of any po	used b	y any ommit	perso	n for the solicit co	purp ontrib	ose outions	ot solici from s	ting co uch c	ontribi ommi	utions ttee.
NAME OF COMMIT												
1 \		ORATION POLITICAL	_ ACT	101	N CC	MMIT	TE	Е				
Full Name (Last, Fi	rst, Middle Initial)											
A. CANDACE M	1ARKWITH					Date of		burse	ment			
Mailing Address 98	0 Isabella Way					01	/	1			014	Y
City		State Zip Code				Tran	cooti	on ID	. DDEE	2004	1 1 C D	E484EA1
San Luis Obispo		CA 93405-6186				IIan	Sacu	טוו ווט	. 6036	30017	44CD	E404EA I
Purpose of Disburs Refund	ement					Amour	nt of	Each	Disburs	emen	t this	Period
Candidate Name			Ca	ategoi	rv/		-			-	٠.	0.00
				Type				7			3	9.00
Office Sought:	House Dis	oursement For: Primary General	ı									
	President	Other (specify)	u									
State:	District:	(-F)/ V										
Full Name (Last, Fi	rst, Middle Initial)											
В.						Date of	of Dis	burse	ment			
Mailing Address						M = N	/	D II	D /	Y	/	Y
Maining Addiess							-			_		_
City		State Zip Code										
Purpose of Disburs	ement											
. ,						Amour	nt of	Each	Disburs	emen	t this	Period
Candidate Name				ategor					-			
Office Courts	House	auroomont Farr		Type				7		-		
Office Sought:	House Dis	oursement For: Primary General	ı									
	President	Other (specify)										
State:	District:											
Full Name (Last, Fi	rst, Middle Initial)											
C.						Date o						
Mailing Address					$\overline{}$	M N	/	D	D /	Y Y	Y Y	Y
City		State Zip Code										
J.,		21p 0000										
Purpose of Disburs	ement			-								
Candidate Name				ategoi Type		Amour	nt of	Each	Disburs	semen	t this	Period
Office Sought:	House Dis	oursement For:		21.5	-			1				
	Senate	Primary General	ıl									
State	President	Other (specify) ▼										
State: [District:											
SUBTOTAL of Disbut	rsements This Page (ontid	onal)						_			3	9.00
						\vdash	+	1		+	+	
TOTAL This Period (I	ast page this line number	only)			•			7			3	9.00

SC	CHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 11 OF 13									
ITEMIZED DISBURSEMENTS		Use separate schedule(s)		(check only one)									
		for each category of the		21b	22 23 24 25 26								
		Detailed Su	ımmary Page	27	28a 28b 28c X 29 30b								
An	y information copied from such Reports and Staten	nents may no	t be sold or us	ed by any perso									
	for commercial purposes, other than using the nam												
	NAME OF COMMITTEE (In Full)												
$ \rangle$	TENET HEALTHCARE CORPORA	TION PC	LITICAL A	ACTION CO	OMMITTEE								
	Full Name (Last, First, Middle Initial)												
Α.	Pennsylvania for Allyson	Date of Disbursement O1 29 2014											
	Markey Address DOD 245												
	Mailing Address PO Box 215												
	City S		+										
	Philadelphia		Zip Code 19105-0215		Transaction ID : BB2F46ACD70CB46D0A00								
	Purpose of Disbursement												
	Primary 2014			1	Amount of Each Disbursement this Period								
	Candidate Name			Category/	1000.00								
				Туре	1000.00								
		nent For: 20											
	Senate X	Primary Other (specify	General										
	State: District:	Other (specing	√) ▼										
	Full Name (Last, First, Middle Initial)												
В.	Citizens for Lightford				Date of Disbursement								
	Citizens for Lightford				M = M / D = D / Y = Y = Y								
	Mailing Address P.O. Box 7824				01 29 _ 2014 _								
	City		Zip Code		Transaction ID : B330A306C5FD44C1CA05								
	Westchester	IL	60154-7824										
	Purpose of Disbursement Primary 2014				Amount of Each Disbursement this Period								
	Candidate Name				Amount of Lacif Disbursement this Fellou								
				Category/ Type	2500.00								
	Office Sought: House Disbursen	nent For: 20	<u> </u> 14	1,750									
		Primary	General										
	President	Other (specify	/) ▼										
	State: District:												
	Full Name (Last, First, Middle Initial)												
C.	Friends of Lisa Hernandez				Date of Disbursement								
		M M / D D / Y Y Y Y											
	Mailing Address 6511 W. Pershing Ave	01 29 2014											
	City S	State 2	Zip Code										
	Stickney		60402-4047		Transaction ID : B376A0071898648AE887								
	Purpose of Disbursement												
	Primary 2014			L	Amount of Each Disbursement this Period								
	Candidate Name			Category/	1500.00								
	000			Type	1300.00								
		nent For: 20											
	Senate President	Primary Other (specify	General										
	State: District:	onioi (specii)	7) ▼										
	2.0												
S	UBTOTAL of Disbursements This Page (optional)				5000.00								
Ĕ													
т	OTAL This Period (last page this line number only)												

SCHEDULE B (FEC Form 3X)				DACE 12 OF 12								
ITEMIZED DISBURSEMENTS		Use separate schedul	le(s)	FOR LINE NUMBER: PAGE 12 OF 13 (check only one)								
		for each category of t		(cneck only	one) 22 23 24 25 26							
		Detailed Summary Pa										
_				27	28a 28b 28c X 29 30b							
	ny information copied from such Reports and Staten											
or	for commercial purposes, other than using the name	ne and address of any p	olitical	committee to	solicit contributions from such committee.							
\setminus	NAME OF COMMITTEE (In Full)											
$ \rangle$	TENET HEALTHCARE CORPORA	TION POLITICA	L AC	CTION CC	DMMITTEE							
V												
	Full Name (Last, First, Middle Initial)											
A.	Mary Gonzalez Campaign	Date of Disbursement										
	Mailing Address P.O. Box 450		01 27 2014									
	City	State Zip Code			Transaction ID : BB4F8ACA4C8974FEA9A0							
	Clint	TX 79836			Transaction ID . BB4F0ACA4C0974FEA3A0							
	Purpose of Disbursement											
	Primary 2014				Amount of Each Disbursement this Period							
	Candidate Name		7 "	Category/	500.00							
				Type	500.00							
	Office Sought: House Disburser	nent For: 2014										
	Senate	Primary Gener	ral									
	President	Other (specify) ▼										
	State: District:											
	Full Name (Last, First, Middle Initial)											
В.	Friends of Don Harmon				Date of Disbursement							
					M = M / D = D / Y = Y = Y							
	Mailing Address 1243 Woodbine Ave				01 29 2014							
	Suite 102											
	City	State Zip Code			Transaction ID : B95FD3A2A69EA4981A55							
	Oak Park	IL 60302-121	3		Transaction is . Bool Bonzhouzhaou							
	Purpose of Disbursement		- I r									
	Primary 2014				Amount of Each Disbursement this Period							
	Candidate Name			Category/	3000.00							
				Туре	3000.00							
		nent For: 2014										
		Primary Gener	al									
	President	Other (specify) ▼										
	State: District:											
	Full Name (Last, First, Middle Initial)											
C.	Friends of Camille Lilly				Date of Disbursement							
					M M / D D / Y Y Y Y							
	Mailing Address 7115 W North Ave				01 29 2014							
	P.O.Box 260											
	•	State Zip Code			Transaction ID : BCECD86C8CBCB4D77A1							
	Oak Park	IL 60302-100	2									
	Purpose of Disbursement Primary 2014											
			L		Amount of Each Disbursement this Period							
	Candidate Name			Category/	1000.00							
	000			Туре	1000.00							
		nent For: 2014										
	Senate	Primary Gener	ral									
	President	Other (specify) ▼										
	State: District:											
5	SUBTOTAL of Disbursements This Page (optional)				4500.00							
H				·								
Iт	OTAL This Period (last nage this line number only)											

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SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 13 OF 13										
ITEMIZED DISBURSEMENTS		Use separate schedule(s)	-			y one)					. •	10 01 10	
		for each category of the Detailed Summary Page	F	2	1b [7	22 28a		23 28b	24		25 29	26 30b	
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\setminus	NAME OF COMMITTEE (In Full) TENET HEALTHCARE CORPORA	ATION POLITICAL A	CTIC	DN.	СО	MMIT	TE	E					
	Full Name (Last, First, Middle Initial)												
Α.	,					Date of Disbursement							
	Mailing Address PO Box 08313					01 29 2014							
	City State Zip Code Chicago IL 60608-0313					Transaction ID : B0AEA04B9042D460B9F6							
	Purpose of Disbursement Primary 2014				Amount of Each Disbursement th						this	Period	
	Candidate Name		Categ		1						150	0.00	
		nent For: 2014 Primary General Other (specify)							,				
	State: District:												
В.	Full Name (Last, First, Middle Initial)				Date of Disbursement							V	
	Mailing Address							L.					
	City State Zip Code												
	Purpose of Disbursement			Amount of Each Disbursement						this	Period		
	Candidate Name	Category/ Type											
		nent For: Primary General Other (specify) ▼											
_	State: District:												
C.	Full Name (Last, First, Middle Initial)					Date of Disbursement							
	Mailing Address												
	City State Zip Code												
	Purpose of Disbursement												
	Candidate Name			gory/ oe	1	Amount of Each Disbursement this Period							
	Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify)											
Г	District.					-	-			_	_		
s	SUBTOTAL of Disbursements This Page (optional)				<u> </u>	<u>_</u>	_	,			1500	0.00	
1	TOTAL This Period (last page this line number only))	•	L		,			11000	0.00	